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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/608,789 Confirmation No.: 2311  
Applicant : TENEREILLO, Peter et al.  
Filed : June 30, 2000  
TC/A.U. : 2157  
Examiner : BURGESS, Barbara N.  
  
Docket No. : CISC662  
Customer No. : 26541  
Title : SERVER LOAD BALANCING METHOD AND SYSTEM

Commissioner for Patents  
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**AMENDMENT A**

Sir:

In response to the Office Action of October 27, 2003, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 10 of this paper.

04/05/2004 CCHAU1 00000081 09608789

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PTO/SB/21 (08-03)

Approved for use through 8/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	<b>Application Number</b>	09/608,789	
	<b>Filing Date</b>	June 30, 2000	
	<b>First Named Inventor</b>	TENEREILLO, Peter et al.	
	<b>Group Art Unit</b>	2157	
	<b>Examiner Name</b>	BURGESS, Barbara N	
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b>	CISCP662

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<input checked="" type="checkbox"/> <b>Fee Attached</b>	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> <b>Amendment / Reply</b>	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> <b>Extension of Time Request</b>	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> <b>Return Postcard</b>
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<b>Remarks</b>	<b>The Commissioner is authorized to charge any additional fees to Deposit Account 50-1652.</b>
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

<b>Firm and Individual name</b>	RITTER, LANG & KAPLAN LLP Cindy S. Kaplan, Reg. No. 40,043
<b>Signature</b>	
<b>Date</b>	March 29, 2004

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<b>Signature</b>	
<b>Date</b>	March 29, 2004

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